



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Tarara et al.	Group No: 1611
Application No: 09/886,296	Examiner: Welter, Rachael E
Confirmation No: 6348	Attorney Docket No: 53250-US-CNT[3] (NV.0054.10)
Filed: June 21, 2001	
Title: ENGINEERED PARTICLES AND METHODS OF USE	January 22, 2010 San Francisco, California 94107

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450	<b>Extension of Time</b> <input checked="" type="checkbox"/> Applicant petitions for an extension of time under 37 C.F.R. 1.136		
<b>Via EFS</b>  <input checked="" type="checkbox"/> Appeal Brief <input type="checkbox"/> Associate Power of Attorney Statement <input type="checkbox"/> Notice of Appeal (form PTO/SB31) <input type="checkbox"/> Drawings (Formal) <input type="checkbox"/> Supplemental Information Disclosure Statement <input type="checkbox"/> PTO-SB08 Form <input type="checkbox"/> Citations <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Postcard for Return (1)	Extension (Months)	Extension Fee	
		Large Entity	Small Entity
	<input type="checkbox"/> One Month	\$130.00	\$65.00
	<input checked="" type="checkbox"/> Two Months	\$490.00	\$245.00
	<input type="checkbox"/> Three Months	\$1,110.00	\$555.00
	<b>Total \$490.00</b>		
	<input type="checkbox"/> Applicant believes that no extension of term is required. However, this conditional petition is being made in case applicant has inadvertently overlooked the need for a petition for extension of time.		

Fees for Extra Claims						
	Claims remaining after amendment	Highest number previously paid for	Number Extra	Rate		Additional Fee
				Large Entity	Small Entity	
Total Claims	44	44	0	\$52.00	\$26.00	\$0.00
Independent Claims	2	2	0	\$220.00	\$110.00	\$0.00
Multiple Dependent Claims			0	\$390.00	\$195.00	\$0.00
Supplemental Information Disclosure Statement						
Total						<b>\$0.00</b>

<b>Fee Payment</b>		<b>Fee Deficiency</b>	
Extension Fee	\$ 490.00	<input checked="" type="checkbox"/> If any additional extension and/or fee is required, please charge Deposit Account No. <u>10-0258</u> . and/or <input checked="" type="checkbox"/> If any additional fee for claims is required, please charge Deposit Account No. <u>10-0258</u> .	
Appeal Brief	\$ 540.00		
<b>Total</b>	<b>\$1,030.00</b>		
<input type="checkbox"/> Attached is check no. _____ in the sum of \$ <u>0.00</u> . <input checked="" type="checkbox"/> Please charge Deposit Account No. <u>10-0258</u> in the sum of <b><u>\$1,030.00</u></b> .		Please direct telephone calls to: Guy V. Tucker at (415) 538-1555 Please continue to send correspondence to: NOVARTIS Corporate Intellectual Property One Health Plaza 104/3 East Hanover, NJ 07936-1080	
<b><u>CERTIFICATE OF TRANSMISSION (37 C.F.R. § 1.8a):</u></b>  I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, facsimile transmitted to the U.S. Patent and Trademark Office at (571)273-8300, or electronically submitted via EFS on the date shown below:		Respectfully Submitted,  <div style="text-align: center;">         By: _____        Guy V. Tucker        Registration No. 45,302     </div>	
By:  Date: <u>January 22, 2010</u> Melanie Hitchcock		Date: <u>January 22, 2010</u>	